

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>12</i>	<i>12</i>	<i>2/17</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>12</i>	<i>60105</i>	<i>2-23-01</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	11-10-01 2-5-01 5-4-01 11-15-01 11-19-01
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Claim	Date
Final Original	11-10-01 2-5-01 5-4-01 11-15-01 11-19-01
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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